P0600052125

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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SECRETARY OF STATE
ALLAHASSEF FLORING

Den 1/26 11

COVER LETTER

TO: Amendment Division o	nt Section f Corporations			
SUBJECT:	THE WRITE TOU			
	Name of Corp	poration		
DOCUMENT NU	MBER:P0600	00052125		
The enclosed State	ment of Change of Registered Office/A	Agent and fee are submitted for filing.		
Please return all co	orrespondence concerning this matter to	the following:		
	Jenny Ka	alota		
	Jenny Ka Name of Conta	ct Person		
Contega Business Services, LLC				
	Firm/Com	pany		
	One Independent D	rive, Suite 1200		
	Addres	S		
Jacksonville, Florida 32202 City/State and Zip Code				
	City/state and	Zip Code		
	jkalota@northflor	idalaw.com		
E-mail address: (to be used for future annual report notification)				
For further informa	ation concerning this matter, please cal	l:		
		004		
Nat	Jenny Kalota ne of Contact Person	at (904) 355-4541 Area Code & Daytime Telephone Number		
1441	ne of Contact Person	Area code & Daytime Telephone Number		
Enclosed is a \$35.0	00 check made payable to the Department	ent of State.		
	N	Samuel Addition		
	Mailing Address: Amendment Section	Street Address: Amendment Section		
	Division of Corporations	Division of Corporations		
	P.O. Box 6327	Clifton Building		
	Tallahassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

TO:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Flori nge is submitted for a corporation organized under the laws of the State	
in order	r to change its registered office or registered agent, or both, in the State	of Florida.
	he corporation: The Write Touch, Inc.	
2. The principal	office address: 1967 San Marco Boulevard, Jacksonville, Flo	rida 32207
3. The mailing a	ddress (if different):	
4. Date of incorp	poration/qualification: April 11, 2006 Document number:	P06000052125
	I street address of the current registered agent and registered office on file tment of State: (If resigned, enter resigned)	e with the
	F & L Corp.	<u></u>
	One Independent Drive, Suite 1300	99 SEC
	Jacksonville, Florida 32202	AHAA
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered	ILED OF STA SSEE, FLOR
	Contega Business Services, LLC	- 28
	One Independent Drive, Suite 1200 P.O. Box NOT acceptable	
	Jacksonville, Florida 32202	
The street addre as changed will	ess of its registered office and the street address of the business office be identical.	of its registered agent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or be board, or the corporation has been notified in writing of the change	y an officer so
- Inlind Signatur	Richard W. Ha re of an officer or director Printed or typed name.	awthorne, VP
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity to comply with the provisions of all statutes relative to the proper and all am familiar with and accept the obligation of my position as regis ng filed merely to reflect a change in the registered office address, I have notified in writing of this change. 2005/07/17 nature of Registered Agent Date	complete performance tered agent. Or, if this tereby confirm that the
~ ~	half of an entity:	
<u> 6. Ka</u>	yped or Printed Name	

* * * FILING FEE: \$35.00 * * *